

## ELECTED OFFICIAL Statement of Financial Interest

RECEIVED
NOV 0 7 2017
S.D. SEC. OF STATE

Elected Officials who file:

State Office elected officials (governor, lieutenant governor, state treasurer, attorney general, secretary of state, state auditor, public utilities commissioner, commissioner of school and public lands, state legislator, circuit court judge and supreme court justice SDCL 3-1A-2);

Gubernatorial Appointee for whom senate confirmation is required shall file with the secretary of state a statement of financial interest before confirmation <u>SDCL 3-1A-3</u>.

Local Office officials (county commissioner, school board member in a school district with a total enrollment of more than 2,000 students, or commissioner, council member, or mayor in any 1<sup>st</sup> class municipality <u>SDCL 3-1A-4</u>)

Deadline to file: Not more than 15 days after the person assumes office AND then not later than the first day of January of every year the person continues to hold the office.

File with: The Secretary of State except local candidates file with the office where they file their oath of office. Please print: David L. Anderson Full Name Complete Address 29177 477th Ave Hudson, SD 57034 Office Sought (list District number if applicable) House of Representatives - District 16 What is your occupation/profession? Farming/Insurance \*\*If there are no changes from your previously filed CANDIDATE Financial Interest Statement check the box and. ✓ NO Changes sign and date below. List any source of funds (business or economic relationship) which contributes more than 10% of or more than \$2,000 to your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. This also includes any enterprise in which you or an immediate family member(s) controls more than 10% of the capital or stock. Identify who receives the income from each enterprise but do not include the value. (SDCL 3-1A-1) \*The intent of this form is to collect specific information, not generalities. Name the Source of Funds Relationship to funds Name of Candidate or (Ex: employee, officer, director, associate, partner, (Ex: current employer, SD Legislature, 401K, Family Member shareholder, owner, member, proprietor, etc.) benefits, etc.) 1 ash Filed this day of SECRETARY OF STATE I declare and affirm under the penalties of perjury that the information above has been examined by me and to the best of my knowledge and belief is a true, correct and complete representation of myself and my immediate family's financial interests for the preceding calendar year. 11-7-2017 (Date) (Signature)